Page 1 of 4

SEEC FORM 1

STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised January 2014



RECEIVED

2015 AUG -5 PM 1:52

TOWN AND CITY CLERK BRISTOL. CT

REGISTRATION TYP	E 1. ELECTION DA	${ m TE}$ (mm/dd/yyyy)	2. OFFI	CE OR POSITION SOUGHT	3. DISTRIC	T NUMBER
☑Initial ☐Amendr	pent 11/02/2017		G:		(If applicable)	
Zimuai Zimendi	nent 11/03/2015		City Co	uncil	District 3	
4. PARTY AFFILIATION	ON					
□ Republican	Democratic	O	ther (Speci	(b)		
5. CANDIDATE NAME						
First Name		MI	ĺ	Last Name		Suffix
Bob				Passamano		
6. CANDIDATE RESID	ENCE ADDRESS			7. CANDIDATE MAILING ADDRESS (If differe	nt)	
Street Address		**		Address		
48 Dino Road		•		Same		
City		State Zip	Code	City	State	Zip Code
Bristol		CT 06	5010			
8. CANDIDATE TELEP	HONE	9. CANDID	ATE EMA	AIL ADDRESS		
(Include Area Code)			_			
(860) 589-1553		Rjp995@f	tr.com			
10. DESIGNATION OF	CAMPAIGN FUNDING	SOURCE				
(Check one)	- 1		,			
A. I am forming a candidate committee and I am required to file a Candidate Committee						
Registration Statement.						
Go to Form 1A and complete pages 2 and 3 — Candidate Registration Statement.						
B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.						
Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.						
Important Notice: Failure of a candidate to complete this page <i>together with</i> either Form 1A, "Registration of Candidate Committee," <i>or</i> Form 1B "Exemption from Forming a Candidate Committee," within 10 days of becoming a candidate will subject the candidate to a mandatory \$100 late filing fee. See Section 9-623(b), Connecticut General Statutes.						
Making a false statement on this form may subject you to criminal penalties, including but not limited to, imprisonment for up to one year or a fine of up to two thousand dollars, or both.						

SEEC FORM 1A

STATE ELECTIONS ENFORCEMENT COMMISSION Candidate Committee Registration Statement



Revised January 2014

REGISTRA	ATION TYPE	CANDIDATE NA	ME				
☑ Initial	□Amendment	Bob Passamano					
11. COMM	ITTEE NAME				and the second of the second o		
Bob Passamano for City Council							
	ITTEE ADDRESS				13. & 14. COMMITTEE EMAIL ADDRESS & V	VEBSITE	
Address					Email Address		
48 Dino F	Road		Totata	Zin Codo	Rjp995@ftr.com		
City		•	State	Zip Code	·		
Bristol			CT	06010	N/A		
	JRER NAME				10 mm		
First Name				MI	Last Name		Suffix
16. TREASU Street Address	URER RESIDENCE	ADDRESS			17. TREASURER MAILING ADDRESS (If different Address	t)	
Succi Address					Address		
			Ta	T			T., _ ,
City			State	Zip Code	City	State	Zip Code
18. TREASL	JRER TELEPHON	E	19. TRE	ASURER EM	AIL ADDRESS		
(INCLUUE AI EU CO	aej						
20. DEPUTY	TREASURER NA	ME					
First Name				MI	Last Name		Suffix
<u> </u>							
	TREASURER RE	SIDENCE ADDRI	ESS		22. DEPUTY TREASURER MAILING ADDRES	S (If different)
Street Address					Address		-
							•
City			State	Zip Code	City	State	Zip Code
I							
23. DEPUTY	TREASURER TE	LEPHONE	24. DEPU	UTY TREASU	URER EMAIL ADDRESS	1	
(Include Area Cod	le)						
25. DEPOSI	TORY INSTITUTION	ON NAME					
26. DEPOSI	TORY INSTITUTI	ON ADDRESS					
Address					City	tate 2	Zip Code

DECICTE	ATION TYPE	CANDIDATENAME	_
		CANDIDATE NAME	
□Initial	Amendment	Bob Passamano	
27. CERTH	TICATION		
comi this s or de	nittee registratio statement include	ate, under penalties of false statement, that all of the designations set forth in this candidate a statement are true and accurate to the best of my knowledge and belief, and further, that is my certification to the fact that any individual designated herein to serve as my treasurer we indicated to me their acceptance of my appointment of them to those positions. S S Zors DATE (mm/dd/yyyy)	
Treasurer			
candi electo conta conce	date to serve as or in the State of ined in Chapter erning campaign	ate, under penalties of false statement, that I have accepted my appointment by the he candidate's designated treasurer of this candidate committee. I certify that I am an Connecticut. I intend to comply with all the campaign finance disclosure requirements as 55 of the General Statutes, and to abide by any prohibitions, limitations or restrictions contributions and expenditures.	
1 cert	iry that I have pa	id any civil penalties or forfeitures assessed pursuant to chapters 155 to 157, inclusive.	
juriso under plea o anoth I cert	liction, any (A) for Title 9 of the Gor the completion er such felony o	t been convicted of or pled guilty or nolo contendere to, in a court of competent clony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense cheral Statues, or that at least eight years have elapsed from the date of the conviction or of any sentence, whichever date is later, without a subsequent conviction of or plea to offense. Otherwise barred from serving as a treasurer by order of the State Elections Enforcement	
TREAS	URER SIGNATURE	DATE (mm/dd/yyyy)	
Deputy Treasurer	•		_
candi and a auton that I requir	date to serve as to eccept that, in the natically become am an elector in rements as conta	tte, under penalties of false statement, that I have accepted my appointment by the ne candidate's designated deputy treasurer of this candidate committee, and I understand event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall responsible for discharging all of the duties required of the vacating treasurer. I certify the State of Connecticut. I intend to comply with all the campaign finance disclosure ned in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or campaign contributions and expenditures.	
I certi	fy that I have pa	d any civil penalties or forfeitures assessed pursuant to chapters 155 to 157, inclusive.	
jurisd under plea o	iction, any (A) f Title 9 of the G	been convicted of or pled guilty or nolo contendere to, in a court of competent lony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense neral Statues, or that at least eight years have elapsed from the date of the conviction or of any sentence, whichever date is later, without a subsequent conviction of or plea to offense.	
	fy that I am not cement Commis	otherwise barred from serving as a deputy treasurer by order of the State Elections ion.	
DEPUT	Y TREASURER SIGNAT	RE DATE (mm/dd/yyyy)	

SEEC FORM 1B

STATE ELECTIONS ENFORCEMENT COMMISSION Certification of Exemption From Forming a Candidate Committee



Revised January 2014

RECISTRA	ATION TYPE	CANDIDATE NAME
		Bob Passamano
⊿ Initial	Amendment	
11. REASO	N FOR EXEMPTIO	N FROM FORMING A CANDIDATE COMMITTEE
I	hereby certify	that I am exempt from forming a candidate committee because: (CHECK ONE)
polit	cical committee	ate of candidates whose campaigns are being funded solely by a town committee or a formed for a single election or primary and expenditures made on my behalf will be mittee sponsoring my candidacy. The name of this sponsoring committee is:
-		
		OR
cont thou	ributions from c sand dollars (\$1	y campaign entirely from my own personal funds and will not request or receive other individuals or committees and I understand that if I make expenditures exceeding one ,000) that I shall be responsible for filing financial disclosure statements (SEEC Form 23) are schedule and in the same manner as required of treasurers of candidate committees.
		OR
☑ C. I	do not intend	to receive or expend funds in excess of one thousand dollars (\$1,000).
		OR
□ D. I	do not intend	to receive or expend any funds, including personal funds, for this campaign.
12. CERTIF	ICATION	
cand		state, under penalties of false statement, that this statement of exemption from forming a c, for the reason checked above, is true, accurate and complete to the best of my of.
CANDI	BA (with a signature)	8/8/2018 DATH (mm/dd/yyyy)